

APPLICATION SPECIAL USE PERMIT

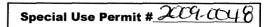
[] Change of Ownership

SUP 2009-00 48

[X] Minor Amendment

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

	703 King Street			
TAX MAP REFERENCE:	74.02 02 08		ZONE: CD/Commercial	Downt
APPLICANT				
Name: _	Zorkafor's SandVeg	Inc.		
Address:	1121 King Street,	Alexandria, Virginia	22314	
PROPERTY OWNER				
Name:	Antonio and Beatr	iz Flores		
Address: _	9030 Lucia Lane,	Alexandria, Virginia	22308	
SITE USE:	Restaurant			
provisions of Article XI, Divi	sion A, Section 11-509 and 11	-511 of the 1992 Zoning Ordinar	nce of City of Alexandria, Virginia.	
permit. The undersigned als	so attests that all of the information	ssion from the property owner, hation herein required to be furnishability	•	
permit. The undersigned als correct and accurate to the l Land, Clark, Carr	so attests that all of the informations and old, Mendelson & Bl	ation herein required to be furnis	•	
permit. The undersigned also correct and accurate to the b Land, Clark, Carr Duncan W. Blair,	so attests that all of the informations and old, Mendelson & Bl Esquire	ation herein required to be furnis	•	
permit. The undersigned also correct and accurate to the land, Clark, Carr Duncan W. Blair, Print Name of Applicant or Ag 524 King Street	so attests that all of the informations and old, Mendelson & Bl Esquire	ation herein required to be furnished belief. air, P.C.	•	
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permit. The undersigned also correct and accurate to the b Land, Clark, Carr Duncan W. Blair, Print Name of Applicant or Ag 524 King Street Mailing/Street Address	so attests that all of the informations of his/her knowledge and oll, Mendelson & B1 Esquire ent	stion herein required to be furnished belief. air, P.C. Signature 703 836-1000 Telephone # dblair@landclar.	thed by the applicant are true, 703 549-3335 Fax #	
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The following information must be furnished to the Department of Planning and Zoning to determine if the current use conducted on the premises complies with the special use permit provisions and all other applicable codes and ordinances.

1.	Please describe prior special use permit approval for the subject use. Most recent Special Use Permit # $\frac{2006-0069}{1}$
	Date approved: 8 / 09 / 2006 month day year
	Name of applicant on most recent special use permit <u>Zorkafor's SandVeg Inc.</u>
	Use Restaurant
	Describe below the nature of the <i>existing</i> operation <i>in detail</i> so that the Department of g and Zoning can understand the nature of the change in operation; include information regarding type of on, number of patrons served, number of employees, parking availability, etc. (Attach additional sheets if ary.)
The	Applicant is currently operating for lunch and dinner and desires to
rea1	locate late night hours approved with its special use permit for morning
hour	s to be open for breakfast.
It i	s not anticipated that the change in the hours of operation will alter
the	character of the current operations.

hours, I addition	hours, how parking is to be provided for employees and patrons, any noise emitted by the use, etc. (Attach additional sheets if necessary)											
The	App	licant	is	reques	sting	appr	oval	to	reallocate	evening	hours	for
mor	ning	hours	in	order	to s	erve	breal	cfas	st.			

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Describe any proposed changes to the business from what was represented to the

Planning Commission and City Council during the special use permit approval process, including any proposed changes in the nature of the activity, the number and type of patrons, the number of employees, the

3.

If the use is closed, provide the date closed.	month day year
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Describe any proposed changes to the	conditions of the special use permit:
The Applicant is requesting a min	nor amendment to Condition 4, governing
the hours of operation to permit	an earlier opening for breakfast and a
corresponding reduction of late	night hours.
Are the hours of operation proposed to If yes, list the current hours and proposed hour	-
Current Hours:	Proposed Hours:
<u>Monday - Thursday 10:00 am -</u> 11:0	00 pm Monday - Thursday 7:00 am - 8:00 pm
Friday - Sunday 10:00 am - midnig	ght Friday - Saturday 7:00 am - 9:00 pr
	Sunday 7:00 am - 4:00 pm
If no list the current number of employees and	the proposed number.
If no, list the current number of employees and Current Number of Employees:	Proposed Number of Employees:
Current Number of Employees:	Proposed Number of Employees: equipment for the business?Yes X_ No

Is off-street parking pr If yes, how many spaces, a		stomers? Yes X_ No ated?	
		r of seats or patrons served?trons served and the proposed number or	
	ants, list the number o	f seats by type (i.e. bar stools, seats at ta	bles,
Current:		Proposed:	
If yes, attach drawings shown devoted to uses, i.e. storage as there a proposed incre	ving existing and proper area, customer serving area in the building	interior space requested? osed layouts. In both cases, include the see area, and/or office spaces. area devoted to the business? ea and the proposed amount of building a	floor a
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Special Use Permit #	Special	Use P	ermit	#
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17. Each application shall contain a clear and concise statement identifying the applicant, including the name and address of each person owning an interest in the applicant and the extent of such ownership interest. If the applicant, or one of such persons holding an ownership interest in the applicant is a corporation, each person owning an interest in excess of ten percent (10%) in the corporation and the extent of interest shall be identified by name and address.

For the purpose of this section, the term "ownership interest" shall include any legal or equitable interest held in the subject real estate at the time of the application. If a nonprofit corporation, the name of the registered agent must be provided.

Please provide ownership information here:

Zorkafor's SandVeg, Inc. is a Virginia corporation. Benjamin Molayem and	
Linda Molayem are the only individuals owning in excess of 10% interest in	
the corporation.	
